

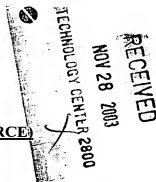


(RCE) #GAV 2877

Atty. Dks No. PHN 15,815

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Peter VAN DE WITTE, et al.
Title: LIQUID CRYSTAL DISPLAY DEVICE, COMPENSATOR LAYER
AND METHOD OF MANUFACTURING A RETARDATION FOIL
Appl. No.: 08/857,756
Appl. Filing Date: May 15, 1997
Examiner: A. Merlino
Art Unit: 2877



REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. § 141, or the commencement of a civil action under 35 U.S.C. § 145 or § 146 (unless the appeal or civil action is terminated).

1. Submission required under 37 C.F.R. § 1.114: (check items that apply)

a. Enclosed are:

☒ Amendment/Reply.

11/14/2003 CCHAU1 00000010 08857756

01 FC:1801
02 FC:1202

770.00 DP
18.00 DP

The filing fee is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Fee Totals
RCE Fee 1.17(e)				\$770.00	\$770.00
Total Claims:	21 <input type="checkbox"/>	20	= 1 x	\$18.00 =	\$18.00
Independents:	3 <input type="checkbox"/>	3	= 0 x	\$86.00 =	\$0.00
First presentation of any Multiple Dependent Claims:				+ \$290.00 =	\$0.00
CLAIMS FEE TOTAL:				=	\$788.00

[] Please charge Deposit Account No. 19-0741 in the amount of \$0.00. A duplicate copy of this transmittal is enclosed.

[X] A check in the amount of \$788.00 to cover the filing fee is enclosed.

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date November 12, 2003

By 

William T. Ellis
Attorney for Applicant
Registration No. 26,874

Keith J. Townsend
Registration No. 40,358